DLN: 93493216003011

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

OMB No 1545-0047

Open to Public Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements

| A F | or the 2 | 2009 ca | alendar yea | r, or tax year beginning 10-01-2009 and ending 09-30-2010 | | | | | |
|--------------------------------|------------|---------------------------|-----------------------|---|--------------|-----------------------|-------------------------------------|--|--|
| B Ch | eck if a | pplicable | Please | C Name of organization International Republican Institute | | D Employer | dentification number | | |
| ☐ Ad | dress ch | change use IRS 52-1340267 | | | | | | | |
| Г _{Na} | me chai | | | | | | | | |
| ┌ In | tıal retui | rn | type. See Specific | (202) 408 | 3-9450 | | | | |
| _ | rmınated | | Instruc- tions. | Number and street (or P O box if mail is not delivered to street address) 1225 Eye Street NW No 700 | Room/ suite | G Gross receip | ots \$ 85,479,348 | | |
| ┌ An | nended i | return | | City or town, state or country, and ZIP + 4 Washington, DC 20005 | | 1 | | | |
| ☐ Ap | plication | pending | | washington, DC 20003 | | | | | |
| | | | F Nan | ne and address of principal officer | H(a) Is th | ■ nis a group reti | urn for | | |
| | | | | V Craner ye Street NW No 700 | | ates? | ┌ Yes 🔽 No | | |
| | | | | gton, DC 20005 | H/h) Aras | all affiliates incl | uded? | | |
| | | | | | ` ' | | st (see instructions) | | |
| I Ta | ax-exem | npt status | 501(c) | (3) ◀ (Insert no) | | up exemption | | | |
| J W | /ebsite | e: 🕨 ww | w ırı org | | | | | | |
| K For | m of org | ganızatıon | ✓ Corporat | on Trust Association Other ► | L Year of fe | ormation 1983 | M State of legal domicile DC | | |
| Pa | rt I | Sum | mary | | | | | | |
| Governance | 1 | Advanc | | e organization's mission or most significant activities and Democracy Worldwide Developing Political Parties, Civic v | Institution | s, Open Elect | ons, Good Governance | | |
| ₹ | _ | | | | | 250/ 61 | | | |
| ŭ | | | , | if the organization discontinued its operations or disposed o | | | | | |
| გნ იბ | | | _ | nembers of the governing body (Part VI, line 1a) | | | 3 27 | | |
| Activities & | | | | dent voting members of the governing body (Part VI, line 1b) | | • | 427 | | |
| ₩. | | | | nployees (Part V, line 2a) | | | 5 291 | | |
| ă | | | | lunteers (estimate if necessary) | | | 7a 223 | | |
| | | | | ted business revenue from Part VIII, column (C), line 12 ness taxable income from Form 990-T, line 34 | • | | 7a | | |
| | B | Net um | erated busi | mess taxable income from Form 990-1, fine 34 | Dri | or Year | Current Year | | |
| | 8 | Contri | hutions and | grants (Part VIII, line 1h) | PIII | 96,131,650 | | | |
| ā | | | | revenue (Part VIII, line 2g) | | 90,131,030 | 05,430,513 | | |
| Rayenue | 10 | | | ne (Part VIII, column (A), lines 3, 4, and 7d) | | 5,979 | 920 | | |
| 2 | 11 | | | art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | -57,832 | -172,953 | | |
| | 12 | | | dd lines 8 through 11 (must equal Part VIII, column (A), line | | 96,079,797 | 85,286,280 | | |
| | 13 | | | ramounts paid (Part IX, column (A), lines 1–3) | | 1,924,451 | 1,573,780 | | |
| | 14 | | | r for members (Part IX, column (A), line 4) | | , ., | 0 | | |
| 82 | 15 | | | empensation, employee benefits (Part IX, column (A), lines 5- | | 17,934,563 | 16,857,846 | | |
| 8 | 16a | • | sional fund | raising fees (Part IX, column (A), line 11e) | | 32,000 | | | |
| Expenses | ь | Total fu | ndraising exp | enses (Part IX, column (D), line 25) •67,500 | | | | | |
| | 17 | Other | expenses (| Part IX, column (A), lines 11a-11d, 11f-24f) | | 76,153,570 | 66,863,505 | | |
| | 18 | Total | expenses A | Add lines 13–17 (must equal Part IX, column (A), line 25) | | 96,044,584 | 85,345,131 | | |
| | 19 | Reven | ue less exp | enses Subtract line 18 from line 12 | | 35,213 | -58,851 | | |
| Net Assets or Fund Balances | | | | | | ng of Current Year | End of Year | | |
| See B | 20 | Total | assets (Par | t X, line 16) | | 12,621,205 | 11,219,683 | | |
| 쭚 | 21 | Total | liabilities (F | Part X, line 26) | | 9,769,734 | 8,427,063 | | |
| žĒ | 22 | Netas | sets or fun | d balances Subtract line 21 from line 20 | | 2,851,471 | 2,792,620 | | |
| Pa | rt II | Sign | ature Blo | ock | | | | | |

Under penalties of perjury, I declare that I have examined this return, including a and belief, it is true, correct, and complete Declaration of preparer (other than o Sign ***** Signature of officer Here Lorne W Craner President Type or print name and title Date Preparer's signature James P Sweeney CPA Paid Preparer's Firm's name (or yours RSM McGLADREY INC if self-employed), address, and ZIP + 4 **Use Only** 8000 TOWERS CRESCENT DR STE 500 VIENNA, VA 221826205

May the IRS discuss this return with the preparer shown above? (see instructio

Part III Statement of Program Service Accomplishments

| Briafly | daccriba | tha | organization's | miccior |
|---------|----------|-----|----------------|---------|
| brienv | describe | tne | organizations | mission |

| IRI advances | freedom and democrac | y worldwide by deve | loping political part | ties, civic institutions, | open elections, Demo | ocratic governance |
|----------------|----------------------|---------------------|-----------------------|---------------------------|----------------------|--------------------|
| and the rule o | f law | | | | | |

| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? |
|----|---|
| | If "Yes," describe these new services on Schedule O |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? |
| | If "Yes," describe these changes on Schedule O |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported |
| 4a | (Code) (Expenses \$ 12,815,842 including grants of \$) (Revenue \$) |
| | Iraqi Governance, Civil Society, and Political Party Programs (DOS S-LMAQM-07-GR-209 6495) This was the largest grant ever managed by IRI, and was used to conduct a wide variety of programs in Iraq from late 2007 through 2010. IRI further developed the capacity of the parliament's Research Directorate (RD), increasing requests made of the RD by parliamentarians five-fold between 2006 and the end of 2010. IRI has supported Iraq's nascent public policy think tank community, sponsoring the research and publication of academic articles and the convening of conferences on topics of public interest. Since the beginning of the grant, the think tank community has gained considerable acceptance among government circles. Prime Minister Maliki has attended IRI-sponsored think tank events, and the Basra Provincial Council completed a project signed with one of IRI's partners to conduct an independent assessment of the council's work. With this grant IRI has assisted a wide range of civil society advocacy campaigns, most successfully an initiative to lower the age of candidacy from 30 to 25, this proposal was accepted by the Kurdistan Regional Government after over a year of advocacy work by IRI partners, and today four percent of the Kurdistan parliament is under the age of 30. Finally, IRI used this grant to support elections-related work, training well over 5,000 candidates and political activists competing in the March 2010 elections, distributing 4.2 million educational mock ballots, and airing 3.6 hours of educational television programming per night in the final ten days before the election. The result. IRI-trained candidates were twice as likely to win seats as the national average, and voter turnout in the eight provinces most targeted by IRI was five percent higher than the national average. |
| | (Code) (Expenses \$ 7,777,136 including grants of \$) (Revenue \$) |
| 4b | Increased Electoral Participation in Afghanistan (USAID Via CEPPS 306-A-00-08-00529-00 8180) IRI Afghanistan supports the Afghan political process by promoting citizen political participation and improving the capacity of independent candidates to effectively run for elective office. Increased Afghan electoral participation is promoted by training candidates and members of issue-based coalitions across the country. By the end of September 2010, IRI supported issue-based coalitions reached a combined membership of more than 150,000 Afghans with representation in 90 percent of all districts throughout the country. For the Parliamentary elections in September 2010, IRI fielded an election observation mission which relied on real time reporting via mobile telephone call-in to an automated tracking system from 160 Afghan observers and five teams of expatriate observers dispersed across 12 provinces. Complementary to these initiatives, IRI directed media programs to educate Afghans about their electoral process and conducted both quantitative and qualitative public opinion research to assess Afghan sentiment. With the elections now past, IRI will work to maintain the growth of its supported social movements and improve their organizational capacity to engage in future elections and promote priorities before the parliament once seated. IRI will continue to engage the memberships of social movements in training at Afghan Campaign Academy workshops focused on improving civic engagement and will increasingly look to build organizational capacity. |
| 4c | (Code) (Expenses \$ 5,660,233 including grants of \$) (Revenue \$) |
| | IRAQ Post-Election Initiatives (DOS S-LMAQM-10-GR-535 6984) Under this broad grant, IRI works with political actors throughout Iraq, including new leadership at the provincial level, political parties, civil society organizations and academic think tanks, to strengthen and expand democratic institutions nationwide IRI has focused its work on instituting greater synergy among its various partners, bringing greater accountability and transparency to government, and increasing effectiveness in legislative drafting. To date, IRI has funded 115 town hall meetings through this grant, facilitating dialogue between Iraqi elected officials and their constituents. Through these events, IRI civil society partners have empowered over 6,000 Iraqis to hold their government accountable, and tangible local governance improvements have begun to be seen. With funds from this grant, IRI has continued to train political parties on the importance of public opinion research, which encourages more sophisticated political party outreach. As a results of these trainings, two political parties in the Kurdistan region of Iraq have take steps towards establishing their own internal polling capacity. |
| 4d | Other program services (Describe in Schedule O) See also Additional Data for Description |
| | (Expenses \$ 48,813,629 including grants of \$ 1,432,767) (Revenue \$) |
| 4e | Total program service expenses►\$ 75,066,840 |
| | |

| | • | | |
|---------|-----------|-------------|-----------|
| Part IV | Checklist | of Required | Schedules |

| | • | | Yes | No |
|-----|--|-----|-----|-----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? 🕏 | 2 | Yes | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 4 | | N o |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | No |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. | 9 | | No |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V | 10 | | No |
| 11 | Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | 11 | Yes | |
| | ◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI. | | | |
| | ◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. | | | |
| | ◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. | | | |
| | ◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. | | | |
| | ◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. | | | |
| | ◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. | | | |
| 12 | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12 | Yes | |
| 12A | Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No | | | |
| | If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional | ĺ | ĺ | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Yes | |
| Ь | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I | 14b | Yes | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II | 15 | Yes | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III | 16 | | No |
| 17 | Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | Yes | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | Yes | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | No |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | No |

| Par | t IV Checklist of Required Schedules (continued) | | | |
|-----|---|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | Yes | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | Νο |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | Yes | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25 | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Νο |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | No |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part | | | |
| | | 28a | | Νο |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV | 28b | | No |
| С | An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | Νo |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | Νο |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | No |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35 | | No |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | Νο |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |

| | 990 (2009) | | | Page |
|-----|--|------------|-----|------|
| Pai | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
| 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable | | Yes | No |
| | 1a 75 | | | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1 c | Yes | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) | 2b | Yes | |
| 3а | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a | | No |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | Yes | |
| b | AF,AL,AO,AJ,BG,BL,BK,CB,CH,CO,TT,ES,GG,GT,ID,IZ,JO,KZ,KE,KG,LE,LH,MK,MX,MD,MG,MO,NU,NI,MU,PK,PE,RS,LO,SF,SU,TU,UG,UP, If "Yes," enter the name of the foreign country ►VE,OC | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Νo |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Νo |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? | 6a | | Νo |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Yes | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Νo |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| Ь | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| 11 | Section 501(c)(12) organizations. Enter | | | |
| | Gross income from members or shareholders | | | |
| Ь | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the vear | | | |

Sonya Vekstein CFO

Washington, DC 20005 (202) 408-9450

1225 Eye Street NW Suite 700

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| Se | ection A. Governing Body and Management | | | |
|----------|--|------------|------------|--------------|
| 30 | ction A. Governing body and management | | Yes | No |
| | | | | |
| | | | | |
| 1a | Enter the number of voting members of the governing body 1a 27 | | | |
| b | Enter the number of voting members that are independent 1b 27 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | Νο |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | Νο |
| 6 | Does the organization have members or stockholders? | 6 | | No |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | | No |
| ь | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | Νο |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| а | The governing body? | 8a | Yes | |
| Ь | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal | | | 110 |
| | venue Code.) | | | |
| | | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | | Νo |
| b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? | 10b | | |
| 11 | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | | | |
| | | 11 | Yes | |
| 11A | Describe in Schedule O the process, if any, used by the organization to review the Form 990 | | | |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise | 12b | Yes | |
| c | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | Yes | |
| 42 | describe in Schedule O how this is done | 12c | | |
| 13 | Does the organization have a written whistleblower policy? | 13 | Yes | |
| 14 15 | Does the organization have a written document retention and destruction policy? | 14 | Yes | |
| _ | Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 15- | V | |
| | The organization's CEO, Executive Director, or top management official | 15a 15b | Yes Yes | |
| U | If "Yes" to line a or b, describe the process in Schedule O (See instructions) | 130 | 165 | |
| | Trives to line a or b, describe the process in schedule of (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | Νo |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the | | | |
| | organization's exempt status with respect to such arrangements? | 16b | | |
| | ection C. Disclosure | | | |
| 17 | List the States with which a copy of this Form 990 is required to be filed ►AK, AL, AR, AZ, CA, CO, CT, FL, G. MD, ME, MI, MN, MS, NC, ND, NH, OK, OR, PA, RI, SC, TN, UT, VA, W | NJ, NI | M,NY, | ОΗ, |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply | , | <u> </u> | , |
| 19 | Own website Another's website Vupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the | ne orda | nızatıor | n ▶ - |

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

| Check this box if the organization did not compensate any current or former officer, director, trustee or key employee | | | | | | | | | | |
|--|-------------------------|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
| (A) Name and Title | (B) Average hours | (C) Position (check all that apply) | | | | | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
| | per week | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the organization (W- 2/1099-MISC) | from related organizations (W- 2/1099- MISC) | compensation from the organization and related organizations |
| See add'l data | | | | | | | | | | |
| | | | | | | | | | | |
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Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►34

| | | | Yes | No | |
|---|--|---|-----|----|--|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual | 3 | | No | |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | | | | |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person | 5 | | No | |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---|--------------------------------------|----------------------------|
| Greystone Limited Whitepark House Whitepark Rd Brdigetown BB | Security | 10,695,643 |
| Blackwater Security PO Box 1029 Moyock, NC 27958 | Security | 7,322,043 |
| Moby media FZ-LLC PO Box 502595 Dubai AE | Media Services | 1,534,720 |
| Pilgrims Group Limited Links Business Centre Old Woking R Woking, surry UK | secunty | 1,075,775 |
| Ardan Energy Services PO Box 262286 dubai AE | secunty | 1,011,794 |
| 2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►43 | who received more than | |

| Form 9 | | | | | | Page 9 |
|--|--------------|---|----------------------|--|---|---|
| | /1111 | Statement of Revenue | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512,513,or 514 |
| Contributions, gifts, grants and other similar amounts | 1a | Federated campaigns 1a | | | | |
| 亞哥 | b | Membership dues 1b | | | | |
| ું.લ | c | Fundraising events 1c 287,525 | | | | |
| ¥g≒ | d | Related organizations 1d | | | | |
| <u>ع آي</u> | e | Government grants (contributions) 1e 85,142,213 | | | | |
| i 호 | f | All other contributions, gifts, grants, and similar amounts not included above | | | | |
| ē ŽŽ | g | Noncash contributions included in | | | | |
| ξğ | | lines 1a-1f \$ | | | | |
| ပွဲခဲ့ | h | Total. Add lines 1a-1f | 85,458,313 | | | |
| | | Business Code | | | | |
| Program Service Revenue | 2a | | | | | |
| æ | ь | | | | | |
| ф Ф | c | | | | | |
| <u>3</u> 5 ≥ | d | | | | | |
| E | e | | | | | |
| e a | f | All other program service revenue | | | | |
| Š | g | | | | | |
| | 3 | Investment income (including dividends, interest | | | | |
| | | and other similar amounts) | 920 | | | 920 |
| | 4 | Income from investment of tax-exempt bond proceeds $\ \ . \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ | | | | |
| | 5 | Royalties | | | | |
| | | (ı) Real (ıı) Personal | | | | |
| | 6a | Gross Rents | | | | |
| | b | Less rental expenses | | | | |
| | c | Rental income or (loss) | | | | |
| | d | Net rental income or (loss) | | | | |
| | | (ı) Securities (ıı) O ther | | | | |
| | 7a b | Gross amount from sales of assets other than inventory Less cost or | _ | | | |
| | | other basis and sales expenses | | | | |
| | c | Gain or (loss) | | | | |
| | d | Net gain or (loss) | | | | |
| Other Revenue | 8a | Gross income from fundraising events (not including \$ 287,525 of contributions reported on line 1c) See Part IV, line 18 | | | | |
| π Œ | | a 20,115 | _ | | | |
| the | ь | Less direct expenses b 193,068 | | | | |
| ٥ | С | Net income or (loss) from fundraising events | -172,953 | | | -172,953 |
| | 9a | Gross income from gaming activities See Part IV, line 19 | | | | |
| | b | Less direct expenses b | _ | | | |
| | C 10- | Net income or (loss) from gaming activities | | | | |
| | IUa | Gross sales of inventory, less returns and allowances . | | | | |
| | b c | Net income or (loss) from sales of inventory | - | | | |
| | 14- | Miscellaneous Revenue Business Code | - | | | |
| | 11a | | | | | |
| | b | | | | | |
| | ر. د | All other revenue | | | | |
| | d e | Total. Add lines 11a-11d | | | | |
| | 12 | Total revenue. See Instructions | | | | |
| | l | | 85,286,280 | 0 | 0 | -172,033 |

Part IX Statement of Functional Expenses

| _ | Section 501(c)(3) and 501(c)(4) organizations m | • | | | |
|----|--|-----------------------|-----------------------------|---------------------------------|-------------------------|
| | ll other organizations must complete column (A) but are not required to | | ns (B), (C), and (B) | (D). (C) | (D) |
| | ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII. | (A) Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$ | 250,000 | 250,000 | | |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | 1,323,780 | 1,323,780 | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 1,249,844 | 820,100 | 429,744 | |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | | | | |
| 7 | Other salaries and wages | 10,599,290 | 6,982,259 | 3,617,031 | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 1,049,629 | 674,557 | 375,072 | |
| 9 | Other employee benefits | 2,978,757 | 1,914,335 | 1,064,422 | |
| 10 | Payroll taxes | 980,326 | 630,019 | 350,307 | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | 160,410 | 62,624 | 97,786 | |
| c | Accounting | 137,822 | 41,548 | 96,274 | |
| d | Lobbying | | | | |
| e | Professional fundraising See Part IV, line 17 | 50,000 | | | 50,000 |
| f | Investment management fees | , | | | • |
| g | Other | 16,940,718 | 16,852,967 | 70,251 | 17,500 |
| 12 | Advertising and promotion | 7,671 | 5,971 | 1,700 | |
| 13 | Office expenses | 2,911,989 | 2,641,957 | 270,032 | |
| 14 | Information technology | 822,126 | 555,313 | 266,813 | |
| 15 | Royalties | 1111 | , | | |
| 16 | Occupancy | 6,359,368 | 4,128,974 | 2,230,394 | |
| 17 | Travel | 12,594,989 | 12,194,608 | 400,381 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 12,000 1,000 | 12,131,000 | 100,501 | |
| 19 | Conferences, conventions, and meetings | 3,207,196 | 3,139,776 | 67,420 | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 247,157 | | 247,157 | |
| 23 | Insurance | 549,562 | 248,236 | 301,326 | |
| 24 | Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) | , | , | , | |
| а | security services | 13,605,636 | 13,605,636 | 0 | |
| ь | field office | 6,072,361 | 6,072,361 | 0 | |
| c | polling | 1,706,804 | 1,706,804 | 0 | |
| d | equipment rental/mainte | 1,347,793 | | 160,300 | |
| e | publications & subscrip | 107,533 | | 58,466 | |
| f | All other expenses | 84,370 | -21,545 | 105,915 | |
| 25 | Total functional expenses. Add lines 1 through 24f | 85,345,131 | 75,066,840 | 10,210,791 | 67,500 |
| 26 | Joint costs. Check here F if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | 55,515,151 | , 3, 300, 510 | 20,220,731 | 37,330 |

Part X Balance Sheet (A) (B) End of year Beginning of year 4.600 4.600 1 1 6,631,109 2 4,184,298 2 3,674,833 3,845,004 3 3 4 818.586 1,071,243 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 Inventories for sale or use 8 9 871.722 861.536 1.870.871 Land, buildings, and equipment cost or other basis *Complete* 10a 10a Part VI of Schedule D 476,136 **10c** 10b 967,909 902,962 Less accumulated depreciation 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 144,219 15 350,040 15 12,621,205 11,219,683 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 16 17 5,668,289 17 6,566,463 Accounts payable and accrued expenses . 730,339 690.937 18 18 1,522,556 19 1,945,018 19 Tax-exempt bond liabilities 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part X of Schedule D 527,914 25 545,281 26 **Total liabilities.** Add lines 17 through 25 9,769,734 8,427,063 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 2,720,243 2,663,812 27 Unrestricted net assets 27 131.228 128.808 28 Temporarily restricted net assets 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 2,851,471 33 2,792,620 Total liabilities and net assets/fund balances 34 12.621.205 34 11,219,683

| | | | Yes | No |
|----|---|----|-----|----|
| 1 | Accounting method used to prepare the Form 990 | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | Νo |
| b | Were the organization's financial statements audited by an independent accountant? | 2b | Yes | |
| c | If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O | 2c | Yes | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both | | | |
| | ▼ Separate basis | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | 3a | Yes | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3b | Yes | |

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

International Republican Institute

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

Employer identification number

| | | | | | | | | | 52-134026 |) / | | | |
|-------------|--------------------------------|---|---|--|---|--|---|--|--|---|---|--|--|
| | rt I | | | olic Charity Stat | | | | | | tructions | | | |
| he | organı | zation is | not a private | e foundation because | ıtıs (Forlu | nes 1 throu | gh 11, check | conly one bo | x) | | | | |
| 1 | Γ | A churc | h, conventio | on of churches, or as | sociation of o | churches s | ection 170(b |)(1)(A)(i). | | | | | |
| 2 | Γ | A schoo | l described | ın section 170(b)(1) | (A)(ii). (Att | ach Schedı | ıle E) | | | | | | |
| 3 | Γ | A hospi | hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the | | | | | | | | | | |
| 4 | Γ | | | organization operate y, and state | ed in conjunc | tion with a | hospital des | cribed in sec | tion 170(b)(1 |)(A)(iii). Ente | erthe | | |
| 5 | Γ | | | rated for the benefit | | or universit | y owned or o | perated by a | a governmenta | l unıt descrıb | _ ed ın | | |
| _ | _ | | | A)(iv). (Complete Pa | • | | | | 3/43/3 | | | | |
| 6 | | | | local government or . | - | | | | | | | | |
| 7 | ~ | describe | ed in | t normally receives a A)(vi) (Complete Pa | | part or its | support from | a governme | ntal unit or fro | m the genera | i public | : | |
| 8 | Г | | | described in section | | .)(vi) (Con | nplete Part II | Ι) | | | | | |
| 9 | | | · · | t normally receives | | | • | · · | outions, memb | ership fees, a | nd gro | ss | |
| | | | | ties related to its ex | | | | | | | | | |
| | | ıts supp | ort from gro | ss investment incom | ne and unrela | ted busine | ss taxable ın | come (less : | section 511 ta | x) from busır | esses | | |
| | | | _ | anızatıon after June 3 | | | | - | | • | | | |
| LO | Г | An orga | nızatıon org | anized and operated | exclusively : | to test for p | oublic safety | Seesection | 509(a)(4). | | | | |
| e f g | Γ | one or n the box a By chec other th section If the or check th Since A following (i) a per | nore publicly that describ Type I king this bo an foundation 509(a)(2) ganization r nis box ugust 17, 2 g persons? rson who dir | anized and operated y supported organizates the type of supported by Type II or Type II or managers and other ceceived a written deceived a written deceived a written deceived or indirectly considered by or indirectly considered by or indirectly considered by of the support o | tions describ orting organiz c / organization i er than one c termination f ration accept | ted in section and of Type III is not control or more publication the IR is alone or to the control of the cont | on 509(a)(1 complete line - Functional colled directly licly support S that it is a or contributi |) or section ! s 11e through ly integrated r or indirectl ed organizat Type I, Type on from any | 509(a)(2) See gh 11h d d y by one or motons described e II or Type II of the | Type II Type II ore disqualified in section 5 | (a)(3). I - Oth d perso 09(a)(| Check ner ons 1) or | |
| | | | | r of a person describ | | _ | | | | 11g(ii) | | | |
| | | • • | • | ed entity of a person | ` ' | | hove? | | | 11g(iii) | | | |
| h | | • • | | g information about t | | | | | | [| | <u> </u> | |
| | (i) Name suppo rganız | e of rted | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see | (iv) Is the organizati col (i) list your gove docume | e ion in ted in rning | Did you n organiza col (i) o supp | otify the ation in of your | (vi) Is th organizal col (i) org in the U | ie tion in janized | A mo | vii) ount of oport? | |
| | | | | (see instructions)) | Yes | No | Yes | No | Yes | No | 1 | | |
| | | | | , , , , , , , , , , , , , , , , , , , | | | | | | | | | |
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| ota | ı | | | | | | 1 | | | | İ | | |

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

| S | ection A. Public Support | | | , | , | | |
|------------|--|---------------------------------------|--|---------------------------------------|---|-------------------------|------------------|
| | endar year (or fiscal year beginning | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual | 79,140,18 | 75,160,367 | 81,724,752 | 96,131,650 | 85,478,428 | 417,635,379 |
| 2 | grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 5 | Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column | 79,140,18 | 75,160,367 | 81,724,752 | 96,131,650 | 85,478,428 | 417,635,379 |
| 6 | (f) Public Support. Subtract line 5 | | | | | | 417,635,379 |
| | from line 4 ection B. Total Support | | | | | | |
| | endar year (or fiscal year | (-) 200F | (h) 2006 | (-) 2007 | (4) 2000 | (-) 2000 | /6) T - t - l |
| | beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 7 | A mounts from line 4 | 79,140,182 | 47,536 | 81,724,752 | 96,131,650 | 85,478,428 | 417,635,379 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 14,737 | 47,536 | 56,212 | 5,979 | 920 | 125,384 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets | | | | | | |
| 11 | Total support (Add lines 7 through 10) | | | | | | 417,760,763 |
| 12 | Gross receipts from related activit | ies, etc (See ins | tructions) | | | 12 | |
| 13 | First Five Years If the Form 990 is check this box and stop here | for the organizat | ion's first, second, | thırd, fourth, or f | ifth tax year as a ! | 501(c)(3) organız | ation, |
| | ection C. Computation of Pu | | | | | | |
| 14 | Public Support Percentage for 200 | • | • | 11 column (f)) | | 14 | 99 970 % |
| 15 | Public Support Percentage for 200 | 8 Schedule A, Pa | art II, line 14 | | | 15 | 99 960 % |
| 16a | 33 1/3% support test—2009. If the and stop here. The organization qu | | | | ine 14 is 33 1/3% | or more, check t | his box |
| b | 33 1/3% support test—2008. If the | - | | | a, and line 15 is 3 | 33 1/3% or more, | . — |
| 17a | box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization me | — 2009. If the organized the " | ganization did not c facts and circumst | heck a box on lir ances" test, che | ck this box and st | op here. Explain | ► ed |
| b | organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga | | | | | | ▶ □ |
| 18 | Explain in Part IV how the organization Private Foundation If the organization | ation meets the " | facts and circumst | ances" test The | organization qual | ifies as a publicly | ▶□ |
| | instructions | | , | ,,,, | : = , = , = , = , = , = , = , = , = , = | | ▶ ┌ |

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

| | (Complete only if you | checked the | box on line 9 of | f Part I.) | | | |
|------|---|------------------|---------------------|---------------------|---------------------|-------------------|--------------------|
| | ction A. Public Support | | | | | | • |
| Cale | ndar year (or fiscal year beginning | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| | in) | | | + | | | |
| 1 | Gifts, grants, contributions, and membership fees received (Do not | | | | | | |
| | include any "unusual grants ") | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | |
| | merchandise sold or services | | | | | | |
| | performed, or facilities furnished in | | | | | | |
| | any activity that is related to the | | | | | | |
| | organization's tax-exempt | | | | | | |
| 3 | purpose Gross receipts from activities that | | | | | | |
| 3 | are not an unrelated trade or | | | | | | |
| | business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either | | | | | | |
| | paid to or expended on its | | | | | | |
| _ | behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| | A mounts included on lines 1, 2, | | | | | | |
| 7 a | and 3 received from disqualified | | | | | | |
| | persons | | | | | | |
| b | A mounts included on lines 2 and 3 | | | | | | |
| | received from other than | | | | | | |
| | disqualified persons that exceed | | | | | | |
| | the greater of \$5,000 or 1% of the | | | | | | |
| _ | amount on line 13 for the year Add lines 7a and 7b | | | | | | |
| 8 | Public Support (Subtract line 7c | | | | | | |
| 0 | from line 6) | | | | | | |
| Se | ction B. Total Support | <u>.I.</u> | | <u> </u> | | ı | I |
| | ndar year (or fiscal year beginning | | (1) 2006 | () 2007 | / IN 2000 | | (C) T |
| | in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
| 9 | A mounts from line 6 | | | | | | |
| 10a | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar | | | | | | |
| L | sources Unrelated business taxable | | | | | | |
| Ь | income (less section 511 taxes) | | | | | | |
| | from businesses acquired after | | | | | | |
| | June 30, 1975 | | | | | | |
| c | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated | | | | | | |
| | business activities not included | | | | | | |
| | in line 10b, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 12 | Other income Do not include gain or loss from the sale of | | | | | | |
| | capital assets (Explain in Part | | | | | | |
| | IV) | | <u> </u> | | | | |
| 13 | Total support (Add lines 9, 10c, | | | | | | |
| | 11 and 12) | | | | | | |
| 14 | First Five Years If the Form 990 is for | or the organizat | ion's first, second | , thırd, fourth, or | fifth tax year as a | a 501(c)(3) orgar | |
| | check this box and stop here | | | | | | ► □ |
| | ction C. Computation of Publ | ic Support F |)orcontago | | | | |
| | | | | 1.2 column (f) | | T 4- T | |
| 15 | Public Support Percentage for 2009 | - | | 13 column (I)) | | 15 | |
| 16 | Public support percentage from 200 | 8 Schedule A , F | Part III, line 15 | | | 16 | |
| | | | | | | | |
| Se | ction D. Computation of Inve | stment Inco | ome Percenta | ge | | | |
| 17 | Investment income percentage for 2 | | | | n (f)) | 17 | |
| 18 | Investment income percentage from | 2008 Schedule | A, Part III. line 1 | .7 | | 18 | |
| | 33 1/3% support tests—2009. If the | | | | line 15 is mars | | dline 17 is not |
| TZG | more than 33 1/3%, check this box a | | | | | a.i 53 1/3%0 and | a iiiie 17 18 1100 |
| | organization | F | organization q | aannes as a pabi | , Japporteu | | |
| ь | 33 1/3% support tests—2008. If the | organization di | d not check a box | on line 14 or line | 19a, and line 1 | 5 is more than 33 | 1/3% and line |

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493216003011

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Open to Public

| | me of the organization | • | Employer identification number | | | | | |
|------|---|---|---|--|--|--|--|--|
| Inte | ernational Republican Institute | | 52-1340267 | | | | | |
| Pa | organizations Maintaining Donor Acorganization answered "Yes" to Form 99 | | | | | | | |
| | <u>.</u> | (a) Donor advised funds | (b) Funds and other accounts | | | | | |
| | Total number at end of year | | | | | | | |
| 2 | Aggregate contributions to (during year) | | | | | | | |
| 3 | Aggregate grants from (during year) | | | | | | | |
| ļ | Aggregate value at end of year | | | | | | | |
| • | Did the organization inform all donors and donor advi- funds are the organization's property, subject to the o | 3 | or advised Yes No | | | | | |
| ; | Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit | efit of the donor or donor advisor, or for ar | ny other purpose Yes No | | | | | |
| Pa | rt III Conservation Easements. Complete | <u>if the organization answered "Yes" t</u> | o Form 990, Part IV, line 7. | | | | | |
| · | Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualiceasement on the last day of the tax year | on or pleasure) Preservation of an Preservation of a c | historically importantly land area certified historic structure of a conservation | | | | | |
| | , | | Held at the End of the Year | | | | | |
| а | Total number of conservation easements | | 2a | | | | | |
| b | Total acreage restricted by conservation easements | | 2b | | | | | |
| c | Number of conservation easements on a certified his | toric structure included in (a) | 2c | | | | | |
| d | Number of conservation easements included in (c) ac | equired after 8/17/06 | 2d | | | | | |
| ; | Number of conservation easements modified, transfe the taxable year 🛌 | | | | | | | |
| ; | Number of states where property subject to conserva Does the organization have a written policy regarding enforcement of the conservation easements it holds? | the periodic monitoring, inspection, hand | | | | | | |
| • | Staff and volunteer hours devoted to monitoring, insp | ecting and enforcing conservation easem | nents during the year ► | | | | | |
| , | A mount of expenses incurred in monitoring, inspecting | | | | | | | |
| 3 | Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? | (d) above satisfy the requirements of sec | Yes No | | | | | |
|) | In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem | he footnote to the organization's financial | • • | | | | | |
| ar | TEXT Complete if the organization answered " | | or Other Similar Assets. | | | | | |
| .a | If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin | for public exhibition, education or research | ch in furtherance of public service, | | | | | |
| b | If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items | oublic exhibition, education, or research i | • | | | | | |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | ► \$ | | | | | |
| | (ii) Assets included in Form 990, Part X | | ► \$ | | | | | |
| 2 | If the organization received or held works of art, histofollowing amounts required to be reported under SFAS | | or financial gain, provide the | | | | | |
| а | Revenues included in Form 990, Part VIII, line 1 | | ▶ \$ | | | | | |

b Assets included in Form 990, Part X

| 3 | Using the organization's accession and othe | | | | | | | | | | <u>(continuea)</u> |
|--------|--|----------------------|---------|---------------|----------|----------|-----------------------------------|--------|------------------------------------|---------------|--------------------|
| | items (check all that apply) | | | _ | | | | | | | |
| а | Public exhibition | | d | J | Loan | orexch | ange prog | rams | | | |
| b | Scholarly research | | e | Γ | Other | - | | | | | |
| c | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co Part XIV | ollections and expla | aın hov | v the | y furthe | er the o | rganızatıoı | n's ex | empt purpose | ın | |
| 5 | During the year, did the organization solicit | | | , | | | | | ıılar | – | |
| D | assets to be sold to raise funds rather than t | | - | | | | | | !! to Farms (| Yes | No |
| Pal | t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an | | | | | | answere | u r | es to roriii s | 990, | |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | ian or other interm | edıary | for c | ontribu | itions o | rotherass | ets r | not | ┌ Yes | ☐ No |
| b | If "Yes," explain the arrangement in Part XI | / and complete the | follow | ing t | able | | Г | I | A - | nount | |
| _ | | | | | | | } | 4 - | AI | nount | |
| ر د | Beginning balance | | | | | | } | 1c | | | |
| d | Additions during the year | | | | | | ŀ | 1d | | | |
| e | Distributions during the year | | | | | | ŀ | 1e | | | |
| Т | Ending balance | | | | | | L | 1f | | | |
| 2a | Did the organization include an amount on Fo | | ie 21? | | | | | | | │ Yes | No |
| | If "Yes," explain the arrangement in Part XIV | | | | 1 1157 | | - 000 | | | | |
| Pa | rt V Endowment Funds. Complete | (a)Current Year | | were Prior | | | Years Back | | t IV, line 10. Three Years Back | (e)Four | Years Back |
| 1a | Beginning of year balance | (a)current rear | (5) | , | Cai | (6) | , rears back | 1(4) | Timee Tears Buck | (C) ou | rears back |
| ь | Contributions | | | | | | | + | | | |
| С | Investment earnings or losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | + | | | |
| e | Other expenditures for facilities | | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | | |
| g | End of year balance | | | | | | | + | | | |
| 2 | Provide the estimated percentage of the yea | r end balance held | as | | | | | | | | |
| a | Board designated or quasi-endowment | | | | | | | | | | |
| ь | Permanent endowment | | | | | | | | | | |
| c | Term endowment ► | | | | | | | | | | |
| 3a | Are there endowment funds not in the posses | ssion of the organiz | ation | that a | are held | d and ac | dministere | d for | the | | |
| | organization by | Ţ | | | | | | | | Ye | s No |
| | (i) unrelated organizations | | | • | | | | • | 3a | `` | |
| | (ii) related organizations | | | | | | | | <u>3a</u> (| | |
| | If "Yes" to 3a(II), are the related organizatio | | | | | | | • | 3 | b | |
| 4 | Describe in Part XIV the intended uses of the triangle of triangle of the triangle of triangle | | | | | 00 Da | rt V line | 10 | | | |
| 261 | t VI Investments—Land, Building: | s, and Equipme | ent. S | | | | | | | . 1 | |
| | Description of investment | | | |) Cost o | | (b) Cost or basis (oth | | (c) Accumulate depreciation | (d) | Book value |
| 1a | Land | | • | | | | | | | | |
| b | Buildings | | | _ | | | | | | | |
| С | Leasehold improvements | | • | | | | 63 | 2,058 | 378,3 | 357 | 253,701 |
| d | Equipment | | | | | | 98 | 6,571 | 465,2 | 279 | 521,292 |
| е | Other | | • | | | | 25 | 2,242 | | 273 | 127,969 |
| | | | | | | | | | ▶ | | 902,962 |

| (a) Description of security or category | | | d of valuation |
|--|------------------------|---------------|---------------------|
| (including name of security) | (b) Book value | | f-year market value |
| Financial derivatives | | | |
| Closely-held equity interests | | | |
| Other | | | |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 12) | | | |
| Part VIII Investments—Program Related. See | | 13. | |
| | | | d of valuation |
| (a) Description of investment type | (b) Book value | Cost or end-o | f-year market value |
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| - 1 /0 / // / / / / / / / / / / / / / / / | | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets See Form 990, Part X line | | | |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin | e 15. | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin (a) Descrip | e 15. tion | | (b) Book value |
| Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 | e 15. tion | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability | e 15. tion | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes | e 15. tion 5.) | | (b) Book value |

| Par | rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen | nts | |
|--------|---|-------|------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 85,286,280 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 85,345,131 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | -58,851 |
| 4 | Net unrealized gains (losses) on investments | 4 | |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9 | 0 |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | 10 | -58,851 |
| | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p | | · |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 86,463,450 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| a | Net unrealized gains on investments | | |
| b | Donated services and use of facilities | | |
| С | Recoveries of prior year grants | | |
| d | Other (Describe in Part XIV) | | |
| e | Add lines 2a through 2d | 2e | 1,177,170 |
| 3 | Subtract line 2e from line 1 | 3 | 85,286,280 |
| 4 | A mounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a | | |
| b | Other (Describe in Part XIV) 4b | | |
| c | Add lines 4a and 4b | 4c | 0 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 85,286,280 |
| Part | XIII Reconciliation of Expenses per Audited Financial Statements With Expenses | s per | Return |
| 1 | Total expenses and losses per audited financial | | 86,522,301 |
| _ | statements | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| a | Donated services and use of facilities | - | |
| b | Prior year adjustments | - | |
| с | Other losses | | |
| d | Other (Describe in Part XIV) | 1 | 1 177 170 |
| e | Add lines 2a through 2d | 2e | 1,177,170 |
| 3 | Subtract line 2e from line 1 | 3 | 85,345,131 |
| 4 | A mounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b 4a | - | |
| Ь | Other (Describe in Part XIV) | _ | _ |
| с - | Add lines 4a and 4b | 4c | 0 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 85,345,131 |
| Pal | rt XIV Supplemental Information | | |

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

| Ident if ier | Ret urn Reference | Explanation |
|---|------------------------|--|
| Part X | Positions Under FIN 48 | Management evaluated IRI's tax positions and concluded that IRI had taken no uncertain tax positions that require adjustment to the financial statements to comply with the provisions of this guidance. With few exceptions, IRI is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years before 2007. |
| Part XII, Line 2d - Other Adjustments | | fundraising expenses reported on line 8b 193068 |
| Part XIII, Line 2d - Other Adjustments | | fundraising expenses reported on line 8b 193068 |

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As Filed Data -

DLN: 93493216003011

OMB No 1545-0047

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

2009

Department of the Treasury Internal Revenue Service

SCHEDULE F

(Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Open to Public **Inspection**

| Name of the organization | Employer identification number |
|------------------------------------|--------------------------------|
| International Republican Institute | |
| | 52-1340267 |

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

| 1 | For grantmakers. Does the organization maintain records to substantiate the amount of the grants or | | | |
|---|--|-----|----------|----|
| | assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award | | | |
| | the grants or assistance? | Yes | \sqcap | No |

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

| 3 Activites per Region (U | se Schedule F-1 | (Form 990) if add | itional space is needed) | | |
|--|-------------------------------------|---|--|--|---|
| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
| Central America and the Caribbean | 2 | 13 | Program Services | Democracy Assistance | 1,002,177 |
| Central America and the Caribbean | | | Grantmakıng | | 223,706 |
| East Asia and the Pacific | 5 | 37 | Program Services | Democracy Assistance | 4,429,947 |
| East Asia and the Pacific | | | Grantmakıng | | 674,675 |
| Europe (Including Iceland & Greenland) | 4 | 13 | Program Services | Democracy Assistance | 2,307,332 |
| Middle East and North Africa | 7 | 92 | Program Services | Democracy Assistance | 42,256,350 |
| Middle East and North Africa | | | grantmakıng | | 54,439 |
| Russia & the Newly Independent States | 8 | 50 | program services | Democracy Assistance | 6,437,556 |
| Russia & the Newly Independent States | | | grantmakıng | | 171,386 |
| South America | 3 | 27 | program services | Democracy Assistance | 3,369,475 |
| South America | | | grantmakıng | | 166,183 |
| South Asia | 2 | 80 | program services | Democracy Assistance | 7,897,802 |
| Sub-Saharan Africa | 7 | 51 | Program Services | Democracy Assistance | 7,649,661 |
| Sub-Saharan A frica | | | Grantmakıng | | 33,391 |
| | | | | | |
| | | | | | |
| Totals ▶ | 38 | 363 | | | 76,674,080 |
| For Privacy Act and Paperwork R | eduction Act Notic | re, see the Instruc | tions for Form 990. | Cat No 50082W Sche | edule F (Form 990) 2009 |

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Schedule F-1 (Form 990) if additional space is needed.

| 1 | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) A mount of cash grant | (f) Manner of cash disbursement | (g) A mount of of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|---|--------------------------|---|---------------------------------|---|------------------------------|---------------------------------------|---|--|--|
| | | | | support Democracy In Cuba | 245,691 | Bank wire | | | |
| | | | East Asia and the Pacific | Promote transparency in local governance and policy development in China | 75,000 | Bank wire | | | |
| | | | East Asia and the Pacific | Encourage democratic multi- party system in Burma and raise political awareness | 49,998 | Bank wire | | | |
| | | | Pacific | Promote democracy and ethnic equality and nuture new generation of leaders | 27,897 | Bank wire | | | |
| | | | Pacific | Support democracy work and democratic transition in Burma | 205,580 | Bank wire | | | |
| | | | East Asia and the | Youth political participation | 91,932 | Bank wire | | | |
| | | | Mıddle East and North Afrıca | Monitoring Human Rights Violations | 65,000 | Bank wire | | | |
| | | | Middle East and North Africa | | 20,000 | Bank wire | | | |
| | | | Russia & the Newly | Support a transparent Independent media | 40,381 | Bank wire | | | |
| | | | Russia & the Newly | Support youth political participation | 82,917 | Bank wire | | | |
| | | | Independent States | Encourage and increase eastern Ukrainian youth political participation | 48,328 | Bank wire | | | |
| | | | Independent States | Strenthen women's leadership skills and increase women's rate on candidate lists | 19,980 | Bank wire | | | |
| | | | | Strengthen political parties' representation and relations with voters and their regions | 166,293 | Bank wire | | | |
| | | | South Asia | Training women to increase their activity in economic and civil life, and build a network of grassroots women | | Bank wire | | | |
| | | | | Promote a free an open society based on rule of law & governace | 35,000 | Bank wire | | | |
| | | | | | | | | | |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

15

Schedule F (Form 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of cash grant disbursement of non-cash valuation assistance recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

| Schedule F (Form 990) 2009 | | Page 4 |
|---|---|---|
| Part IV Supplemental Inf Complete this part to | | red in Part I, line 2, and any additional information. |
| Identifier | ReturnReference | Explanation |
| Procedure for Monitoring Grants Outside the U S | TKCCUTTIKCTCTCTCTCTCTCTCTCTCTCTCTCTCTCTCTCTCT | Schedule F, Part I, Line 2 IRI evaluates financial risk and performs management assessment of grantees Monitoring is established based on risk factors. Grantees submit narrative and financial reports according to established schedule. Performance is evaluated and monitored regularly. Program staff performs onsite visits to evaluate program activities. Field offices report financial transactions on a monthly basis. Finanacial oversight is provided by a regional accountant in the field and HQ accounting department in DC. Program and financial staff visit field office on a regular basis. |
| Schedule F, Part IV | O ther Information | Part I, Line 3 Additional information Activities per region. The Women's Democracy Network (WDN) programs helps prepare women for greater participation in politics, governance and civil society. WDN also increases the capacity of foreign women's organizations to increase their reach in society through grantmaking activities. These programs benefit multiple regions outside the United States but the costs are not separately tracked as such and are therefore listed here as its own category. Program Services - Democracy Assistance. \$851,985. |
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As Filed Data -

DLN: 93493216003011

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

International Republican Institute

Supplemental Information Regarding Fundraising or Gaming Activities

2009

Employer identification number

52-1340267

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

OMB No. 1545-0047

| 1 Indicate whether the | organization raised fund: | s through a | any of the | following activities Che | eck all that apply | |
|---|---------------------------|-------------------------------------|---|---------------------------|---|--|
| a Mail solicitations | | | е | Solicitation of non | -government grants | |
| b Internet and e-m | aıl solıcıtatıons | | f | Solicitation of gov | ernment grants | |
| c 🔽 Phone solicitatio | าร | | g | Special fundraisin | g events | |
| d 🔽 In-person solicit | ations | | | | | |
| or key employees list b If "Yes," list the ten h | (i) Name of individual | | ın conne | ction with professional f | undraising activities? | Yes No |
| | | (iii) fundrais custo conti | Did erhave dy or ol of | (iv) Gross receipts | (v) A mount paid to (or retained by) fundraiser listed in | (vi) A mount paid to (or retained by) |
| (i) Name of individual | | (iii) fundrais custo conti | Did er have dy or ol of utions? | (iv) Gross receipts | (v) A mount paid to (or retained by) | (vi) A mount paid to |
| (i) Name of individual | | (iii) fundrais custo conti | Did erhave dy or ol of | (iv) Gross receipts | (v) A mount paid to (or retained by) fundraiser listed in | (vi) A mount paid to (or retained by) |

| Pa | rt II | Fundraising Events. Com more than \$15,000 on Form | | | | | or re | port | ed |
|-----------|-------|--|--|--|----------------------------------|---|---------------------------------------|--------|-------|
| | | | (a) Event #1 Freedom Award Dinner 2009 (event type) | (b) Event #2 Freedom Award Dinner 2010 (event type) | (c) O ther Events (total number) | (b) | Total col (a | a) thr | |
| £ | 1 | Gross receipts | 146,640 | 161,000 | | | | 307 | 7,640 |
| Revenue | 2 | Less Charitable contributions | 146,640 | 140,885 | | | | 287 | 7,525 |
| | 3 | Gross income (line 1 minus line 2) | | 20,115 | | | | 20 | 0,115 |
| | 4 | Cash prizes | | | | | | | |
| မှာ () | 5 | Non-cash prizes | 795 | 2,550 | | | | 3 | 3,345 |
| Expenses | 6 | Rent/facility costs | 54,095 | 7,500 | | | | 61 | 1,595 |
| ង្គ | 7 | Food and beverages | | | | | | | |
| Direct | 8 | Entertainment | | | | | | | |
| ۵ | 9 | Other direct expenses . | 38,873 | 89,255 | | | | 128 | 3,128 |
| | 10 | Direct expense summary Add line | _ | | | | | 193 | 3,068 |
| D | 11 | Net income summary Combine lin | | | | | | | 2,953 |
| Par | t III | Gaming. Complete if the or \$15,000 on Form 990-EZ, lin | | "Yes" to Form 990, Pa | rt IV, line 19, or repo | rtea n | nore i | tnan | ı |
| Revenue | | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) O ther gaming | (b) | Total col (a col (|) thr | |
| | 1 | Gross revenue | | | | | | | |
| ses | 2 | Cash prizes | | | | | | | |
| sesued | 3 | Non-cash prizes | | | | | | | |
| Direct Ex | 4 | Rent/facility costs | | | | | | | |
| ă | 5 | Other direct expenses | | | | | | | |
| | 6 | Volunteer labor | | Г Yes | | | | | |
| | | Direct expense summary Add lines Net gaming income summary Com | | | | | | | |
| _ | | | | | | · | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | es | No |
| 9 a | Is th | er the state(s) in which the organiza he organization licensed to operate | | <u>- </u> | | . <u> </u> | 9a | | |
| Ь | | No," Explain | | | | | | | |
| 10a b | | e any of the organization's gaming l Yes," Explain | ıcenses revoked, suspen | ded or terminated during | the tax year? | 1 | .0a | | |
| 11 12 | Is th | es the organization operate gaming a he organization a grantor, beneficial ned to administer charitable gaming | ry or trustee of a trust or | a member of a partnersh | p or other entity | | 11 | | |
| | | | | | Schedule G (Form 9 | 990 or 9 | 90-EZ | 2) 20 | 09 |

| | | Yes | No |
|-----|---|--|-------------------|
| .3 | Indicate the percentage of gaming activity operated in | | |
| а | The organization's facility | | |
| b | An outside facility | | |
| .4 | Enter the name and address of the person who prepares the organization's gaming/special events books and records | | |
| | | | |
| | Name • | | |
| | | | |
| | Address • | | |
| | | | |
| .5a | Does the organization have a contract with a third party from whom the organization receives gaming | | |
| | revenue? | <u>. </u> | $ldsymbol{f eta}$ |
| b | If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the | | |
| | amount of gaming revenue retained by the third party 🟲 \$ | | |
| С | If "Yes," enter name and address | | |
| | Name 🟲 | | |
| | | | |
| | Address 🏲 | | |
| | | | |
| 6 | Gaming manager information | | |
| | | | |
| | | | |
| | Name • | | |
| | Gaming manager compensation 🕨 \$ | | |
| | Description of services provided 🗠 | | |
| | Description of services provided # | | |
| | Director/officer Employee Independent contractor | | |
| 7 | Mandatory distributions | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to | | |
| | retain the state gaming license? | <u>. </u> | |
| b | Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year | | |

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DLN: 93493216003011

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

International Republican Institute

Name of the organization

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Open to Public **Inspection**

| Form 990, Part I\ | /, line 21 for any | o Governments and recipient that received 90) if additional space i | l more than \$5,000. | Check this box if n | o one recipient rece | ived more than \$5,0 | 00. Use |
|---|--------------------|---|------------------------------|---|---|--|--|
| (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of gran or assistance |
| The Dui Hua Foundation400 Sutter Street San Francisco, CA 94108 | 943327519 | 501(c)(3) | 250,000 | | | | Monitoring political dissent and social protest in China |
| | | | | | | | |
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|----------|--|--|--------------------------|
| Part III | Grants and Other Assistance to Individuals in the United State | s. Complete if the organization answered "Yes" to Form | n 990, Part IV, line 22. |
| | Use Schedule I-1 (Form 990) if additional space is needed. | | |

| (a) Type of grant or assistance (b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (book, FMV, appraisal, other) (f) Description of non-cash assistance (book, FMV, appraisal, other) | | | | |
|--|--------------------------------|-----------------------------|--------|---------------------------------------|
| | (a)Type of grant or assistance | (c)A mount of cash grant | (book, | (f)Description of non-cash assistance |
| | | | | |
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Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

| Ident if ier | Return Reference | Explanation |
|---|------------------|--|
| Procedure for Monitoring Grants in the U S | Part I, Line 2 | Schedule I, Part I, Line 2 IRI evaluates financial risk and performs management assessment of grantees Monitoring is established based on risk factors. Grantees submit narrative and financial reports according to established schedule. Performance is evaluated and monitored regularly. Program staff performs on-site visits to evaluate program activities. Field offices report financial transactions on a monthly basis. Finanacial oversight is provided by a regional accountant in the field and HQ accounting department in DC. Program and financial staff visit field office on a regular basis. |
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DLN: 93493216003011

OMB No 1545-0047

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization International Republican Institute

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

52-1340267

| Pa | Questions Regarding Compensation | <u>n</u> | | | |
|----|--|--|----|-----|----|
| | | | | Yes | Νo |
| 1a | | ovided any of the following to or for a person listed in Form I to provide any relevant information regarding these items | | | |
| | First-class or charter travel | Housing allowance or residence for personal use | | | |
| | Travel for companions | Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc | rganization follow a written policy regarding payment or ribed above? If "No," complete Part III to explain | 1b | Yes | |
| 2 | Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive | | | V | |
| | officers, directors, trustees, and the CLO/Executive | bliector, regarding the items checked in fine 14. | 2 | Yes | |
| 3 | Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all the | | | | |
| | Compensation committee | Written employment contract | | | |
| | ☐ Independent compensation consultant | ✓ Compensation survey or study | | | |
| | Form 990 of other organizations | A pproval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, or a related organization | Part VII, Section A, line 1a with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-control | payment? | 4a | Yes | |
| ь | Participate in, or receive payment from, a suppleme | ntal nonqualified retirement plan? | 4b | | Νo |
| c | Participate in, or receive payment from, an equity-b | ased compensation arrangement? | 4c | | Νο |
| | If "Yes" to any of lines 4a-c, list the persons and pr | rovide the applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only me | ust complete lines 5-9. | | | |
| 5 | For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of | line 1a, did the organization pay or accrue any | | | |
| а | The organization? | | 5a | | Νo |
| b | Any related organization? | | 5b | | Νo |
| | If "Yes," to line 5a or 5b, describe in Part III | | | | |
| 6 | For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of | line 1a, did the organization pay or accrue any | | | |
| а | The organization? | | 6a | | Νo |
| ь | Any related organization? | | 6b | | Νο |
| | If "Yes," to line 6a or 6b, describe in Part III | | | | |
| 7 | For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," o | | 7 | | No |
| 8 | Were any amounts reported in Form 990, Part VII, | paid or accured pursuant to a contract that was | | | |
| | subject to the initial contract exception described in | n Regs section 53 4958-4(a)(3)? If "Yes," describe | | | |
| | ın Part III | | 8 | | Νo |
| 9 | If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)? | e rebuttable presumption procedure described in Regulations | 9 | | |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation | |
|-----------------------|-------------|--|------------|---|--------------------------------|------------------------|----------------------|---|--|
| | | (i) Base (ii) Bonus & incentive compensation | | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or Form 990-EZ | |
| Lorne W Craner | (I) (II) | 211,642 0 | 0 | 1,413 0 | 21,808 0 | 14,138 0 | 249,001 0 | | |
| Judy Van Rest | (I) (II) | 161,247 0 | 0 0 | 1,144 0 | 17,654 0 | 6,628 0 | 186,673 0 | | |
| Georges A FAuriol | (I) (II) | 131,110 0 | 0 0 | 0 | 15,577 0 | 10,971 0 | 157,658 0 | | |
| Elizabeth Dugan | (ı) (ıı) | 90,333 0 | 0 0 | 47,366 0 | 9,088 0 | 5,409 0 | 152,196 0 | | |
| Harold W Collamer | (I) (II) | 157,457 0 | 0 0 | 0 | 15,577 0 | 3,702 0 | 176,736 0 | | |
| Sonya Vekstein | (ı) (ıı) | 143,122 0 | 0 | 0 | 15,058 0 | 13,770 0 | 171,950 0 | | |
| Thomas Garrett | (ı) (ıı) | 129,965 0 | 6,175 0 | 2,828 0 | 13,950 0 | 5,262 0 | 158,180 0 | | |
| Johanna Kao | (ı) (ıı) | 86,497 0 | 0 0 | 85,802 0 | 8,861 0 | 10,809 0 | 191,969 0 | | |
| Hans Holzen | (ı) (ıı) | 87,552 0 | 0 | 61,963 0 | 9,113 0 | 6,533 0 | 165,161 0 | | |
| Robert A Varsalone II | (I) (II) | 82,473 0 | 0 | 52,769 0 | 8,308 0 | 32,097 0 | 175,647 0 | | |
| Stephen Nıx | (I) (II) | 126,305 0 | 6,170 0 | 0 0 | 13,429 0 | 13,886 0 | 159,790 0 | | |
| | | | | | | | | | |
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Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

| Ident if ier | Ret urn Ref erence | Explanat ion |
|--------------|-----------------------|--|
| | Part I, Line 1a | some Resident Country Directors received housing allowance, which is taxable |
| | Part I, Line 4a | Elizabeth Dugan received a severance payment at the amount of \$47,366 for her resignation as VP for Programs on July 31, 2009 |
| - | | |

Schedule J (Form 990) 2009

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As Filed Data -

DLN: 93493216003011

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Name of the organization International Republican Institute Employer identification number

52-1340267

| ldentifier | Return Reference | Explanation |
|----------------------------------|----------------------------|--|
| Form 990, Part III, line 2 | New Program Services | IRAQ Post-Election Initiatives (DOS S-LMAQM-10-GR-535 6984) Under this broad grant, IRI works with political actors throughout Iraq, including new leadership at the provincial level, political parties, civil society organizations and academic think tanks, to strengthen and expand democratic institutions nationwide. IRI has focused its work on instituting greater synergy among its various partners, bringing greater accountability and transparency to government, and increasing effectiveness in legislative drafting. To date, IRI has funded 115 town hall meetings through this grant, facilitating dialogue between Iraqi elected officials and their constituents. Through these events, IRI civil society partners have empowered over 6,000 Iraqis to hold their government accountable, and tangible local governance improvements have begun to be seen. With funds from this grant, IRI has continued to train political parties on the importance of public opinion research, which encourages more sophisticated political party outreach. As a results of these trainings, two political parties in the Kurdistan region of Iraq have taken steps towards establishing their own internal polling capacity. |

| ldentifier | Return Reference | Explanation |
|---|---------------------|--|
| Form 990, Part VI, Section B, line 11 | | It is IRI's policy that IRI's Board of Directors reviews the IRS Form 990 that is filed on the organizations behalf before it is filed with the IRS. A board resolution is not required in order for the Form 990 to be filed. The means of delivery shall be via email to each director's email address. Before the Form 990 is delivered to the IRI's Board of Directors, the Form is reviewed by the members of the Audit Committee. The Form 990 is delivered to the Audit Committee via email to each committee member's email address. |

| ldentifier | Return Reference | Explanation |
|---|---------------------|---|
| Form 990, Part VI, Section B, line 12c | | Employees are to maintain a high standard of ethical business practices in all institute operations. Activities, actions, or business interests that jeopardize or overlap the interests of The Institute are a basis for conflict and are prohibited. To avoid any potential conflicts of interest, employees are prohibited from engaging in any outside activities or employment that may materially interfere with the effective performance of Institute responsibilities or which clearly are not compatible with the Institute's best interests. The President should be notified immediately of any potential conflicts of interest. IRI does not prohibit the hiring of individuals related to existing IRI staff. However, such individuals cannot be considered for positions where the hiring decision would be made by a relative. In addition, relatives may not work in positions that would entail a supervisor/subordinate relationship. |

| ldentifier | Return Reference | Explanation |
|--|---------------------|--|
| Form 990, Part VI, Section B, line 15 | | The Chair of the Compensation Committee of IRI's Board reviewed the comparability of data for the compensation levels of IRI's President and all other officers, interviewed all officers and presented his findings to the full Board for discussion and approval |

| ldentifier | Return Reference | Explanation |
|---------------------------------------|---------------------|--|
| Form 990, Part VI, Section C, line 19 | | The organization makes its governing documents, conflict of interest policy, and financial statements available upon request |

| ldentifier | Return Reference | Explanation |
|----------------------------|------------------|--|
| form 990, part XI, line 2c | | the process has been consistent with prior years |

| ldentifier | Return Reference | Explanation |
|--|-------------------------------------|---|
| Schedule G, Part I, Line 2b, Column (v) | Explanation of Fundraising Payments | payments are made to the fundraiser for professional services related to the fundraising activity |

| ldentifier | Return Reference | Explanation |
|------------|---------------------|---|
| | | form 990, schedule G, Part II special event detail Event #1 IRI's Freedom Award Dinner 2009 honoring former Secretary of State Henry Kissinger was held on October 9, 2009, the beginning of IRI's fiscal year 2010. The majority of its revenue and expenses have been reported in prior 990 fillings. Event #2 IRI's Freedom Award Dinner 2010 honoring former Secretary of State George P. Shultz was held on October 4, 2010, the beginning of IRI's fiscal year 2011. Amounts reported reflect contributions received and expenses incurred during IRI's fiscal year 2010. |

| ldentifier | Return Reference | Explanation |
|--------------------------|--------------------------|--|
| form 990, part I, line 6 | the number of volunteers | Number of Volunteers is based on in-kind contributions recognized for fiscal year 2010 |

Additional Data

Software ID:

Software Version:

EIN: 52-1340267

Name: International Republican Institute

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 48,813,629 including grants of \$ 1,432,767) (Revenue \$

other programs for Sudan, Uganda, Peru, Cuba, Syria, China, Mali, Burma, Belarus, Serbia, Burma, South Africa, Colombia, Mexico, Ukraine, Cambodia, and other countries Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| Compensated Employees, and Independent Contractors | | | | | | | | | | |
|--|---------------------------------|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
| (A) Name and Title | (B) A verage hours per | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the | (E) Reportable compensation from related | (F) Estimated amount of other compensation |
| | week | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | organization (W- 2/1099-MISC) | organizations (W- 2/1099- MISC) | from the organization and related organizations |
| Senator John McCain Chairman | 1 00 | х | | х | | | | 0 | 0 | 0 |
| Peter T Madıgan Vıce Chaırman | 1 00 | Х | | x | | | | 0 | 0 | 0 |
| J William Middendorf II Secretary-Treasurer | 1 00 | х | | х | | | | 0 | 0 | 0 |
| thomas M Barba general Councıl | 1 00 | х | | х | | | | 0 | 0 | 0 |
| Gahl Hodges Burt dırector | 1 00 | х | | | | | | 0 | 0 | 0 |
| Lawrence S Eagleburger dırector | 1 00 | х | | | | | | 0 | 0 | 0 |
| Frank J Fahrenkopf Jr director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Alison B Fortier Director | 1 00 | Х | | | | | | 0 | 0 | 0 |
| Cheryl F Halpern Dırector | 1 00 | Х | | | | | | 0 | 0 | 0 |
| William J Hybl Director | 1 00 | Х | | | | | | 0 | 0 | 0 |
| Jım Kolbe Dırector | 1 00 | х | | | | | | 0 | 0 | 0 |
| MICHAEL KOSTIW Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Stephan m minikes Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Janet G Mullins Grissom Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Constance Berry Newman Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Alec L Poitevint II Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| John FW Rogers Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| Randy Scheunemann Dırector | 1 00 | х | | | | | | 0 | 0 | 0 |
| joseph R Schmuckler director | 1 00 | х | | | | | | 0 | 0 | 0 |
| brent Scowcroft Dırector | 1 00 | х | | | | | | 0 | 0 | 0 |
| Gordon Smith Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| margaret Tutwiler Director | 1 00 | Х | | | | | | 0 | 0 | 0 |
| olin L Wethington director | 1 00 | х | | | | | | 0 | 0 | 0 |
| richard Williamson Director | 1 00 | х | | | | | | 0 | 0 | 0 |
| David Dreier Director | 1 00 | × | | | | | | 0 | 0 | 0 |

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A) Name and Title | (B) Average hours per | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the | (E) Reportable compensation from related | (F) Estimated amount of other compensation |
|--|--------------------------------|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | week | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | organizations (W- 2/1099- MISC) | from the organization and related organizations |
| Lındsey Graham Dırector | 1 00 | х | | | | | | 0 | 0 | 0 |
| Kay Granger Dırector | 1 00 | Х | | | | | | 0 | 0 | 0 |
| Lorne W Craner President | 40 00 | | | x | | | | 213,055 | 0 | 33,330 |
| Judy Van Rest Exec Vice President | 40 00 | | | х | | | | 162,391 | 0 | 21,449 |
| Daniel Fisk Senior Vice President | 40 00 | | | х | | | | 27,165 | 0 | 325 |
| Georges A FAuriol Senior Vice President | 40 00 | | | х | | | | 131,110 | 0 | 23,915 |
| Elizabeth Dugan VP for Programs | 40 00 | | | х | | | | 137,699 | 0 | 12,883 |
| Harold W Collamer COO | 40 00 | | | х | | | | 157,457 | 0 | 16,126 |
| Sonya Vekstein CFO | 40 00 | | | х | | | | 143,122 | 0 | 26,580 |
| Thomas Garrett VP For Programs | 40 00 | | | х | | | | 138,968 | 0 | 17,745 |
| Johanna Kao Resident Country Director | 40 00 | | | | | х | | 172,299 | 0 | 17,905 |
| Hans Holzen Resident Country Director | 40 00 | | | | | х | | 149,515 | 0 | 13,793 |
| Robert A Varsalone II Resident Country Director | 40 00 | | | | | х | | 135,242 | 0 | 23,242 |
| Stephen Nıx Regional Program Director | 40 00 | | | | | х | | 132,475 | 0 | 24,951 |
| Jan Surotchak Regional Program Director | 40 00 | | | | | х | | 127,997 | 0 | 20,546 |

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

| Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|------------------------------------|---|--------------------------------|
| security services | 13,605,636 | 13,605,636 | 0 | |
| field office | 6,072,361 | 6,072,361 | 0 | |
| polling | 1,706,804 | 1,706,804 | 0 | |
| equipment rental/mainte | 1,347,793 | 1,187,493 | 160,300 | |
| publications & subscrip | 107,533 | 49,067 | 58,466 | |